

Chapter Eight

Care in the countryside: the theory and practice of therapeutic landscapes in the early twentieth-century

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In 1945 Jane Whitney, when writing her biography of Geraldine Cadbury visited the Cropwood Open-Air School in Blackwell and described how ‘the sleep-time garden might be the envy of princes, with its fountain in the midst of a green lawn, so that the children took their naps amid the soothing, somnolent splash of falling water’.¹ This evocative description of a princely garden gives an indication of the attention and importance given to gardens associated with such institutions in the early decades of the twentieth-century (Figure 8.1). Cropwood (opened in 1922) was just one of a number of open-air schools and hospitals operating at this time in Blackwell, near Bromsgrove, in the West Midlands. The open-air approach to treating chronic diseases such as tuberculosis became popular in the late nineteenth and early twentieth-century in Britain. It encouraged inmates to spend as much time as possible in the fresh air and sunshine, as both were considered to have curative properties. The 1937 Ordnance Survey (OS) Map depicts a cluster of such institutions - along with Cropwood these were: Hunters Hill Open-Air School (opened 1933), The Uplands (Children’s Convalescent Home, opened 1923), Burcot Grange (annexe to Birmingham and Midland Eye Hospital, opened 1936) and the Birmingham and Midland Counties Sanatorium, which became known as the Blackwell Convalescent Home (opened on this site in 1873) (Figure 8.2, 8.3). This chapter will explore this cluster but focus in detail on the gardens associated with Cropwood and the Blackwell Convalescent Home. In particular it will aim to unpick the design and use of these gardens in relation to contemporary medical and social ideas. In so doing, it will illuminate the connections between garden history and histories of health care, which is a growing research area. Historians that have explored this connection

in relation to designed green spaces include myself and Sarah Rutherford. Medical historians, particularly Andrew Scull and Linda Bryder, have discussed the hospital landscape in relation to issues such as economics and national efficiency. Similarly, cultural geographers have taken an interest in the concept of ‘therapeutic landscapes’, including the work of Chris Philo on asylums, Hester Parr on mental health and space, and Wil Gesler, who originally coined the term.²

For this consideration of open-air institutions and their landscapes, a wide range of primary source material has been analysed. These sources have included institutional prospectuses and reports, published medical accounts, personal descriptions of visits (Jane Whitney’s biography of Geraldine Cadbury included detailed eye-witness accounts) and postcards (which have yielded photographic evidence as well as a patient account). As with similar studies, the main limitation has been the general lack of contemporary patient and children’s voices. Some of this has been overcome by drawing on the rich oral histories collected and published by Frances Wilmot and Pauline Saul, which give a valuable, albeit selective, insight into the children’s experiences of the institutions.³ Such varied source material has been utilised so that the design, use and experience of the gardens can be explored from a range of perspectives.

Location, location, location

As this geographical clustering of medical institutions attests, Blackwell as a location was considered to have relevant environmental characteristics. One determining factor seems to be that it retained its rural nature whilst still being in close proximity to the urban centre of Birmingham. The institutions in Blackwell were all in some way designed to give children and adults a rural respite and place of recovery, away from the unhealthy urban conditions of the city. Blackwell itself also had good road and rail links, which meant that there was easy access for patients and visitors.

The earliest of these institutions was the Blackwell Convalescent Home, which was established in 1866 to be used specifically for convalescent purposes for paying patients. Initially the sanatorium was based in an existing domestic building but after a few years nine acres of land near Blackwell Station were purchased from the Midland Railway. On this land a purpose-built home was constructed, which opened on 16 April 1873 for a maximum of sixty patients (Figure 8.4). In 1876 a subscription fund was established by the gentlemen of Worcester to help with the immediate costs of completing the building as well as the financial burden of staying in the home for poorer patients.⁴ In 1921 the Home became known as the Blackwell Convalescent Home for Birmingham and the Midland Counties.⁵

An undated prospectus for the Home indicates that its location was considered important in relation to patient recovery, or at least seen as a useful marketing device to family members and local physicians who might refer patients:

Send your convalescent to Blackwell on the sunny southern slopes of the Lickey Hills to regain health and strength. The Home stands in its own grounds of 12 acres on a gravel soil, high on the S/W foothills of the Lickey Hills, with the ground sloping rapidly away below it. The windows look right over the length and breadth of Worcestershire, across the Severn Valley to the Malvern Hills, 20 miles away, with a view, in clear weather of the Mountains of Wales, from which the prevailing S/W wind blows.⁶

The writer of the prospectus clearly linked health and strength to the environmental conditions found at Blackwell. This was in line with national trends. According to Harriet Richardson, ‘most convalescent homes were situated in the countryside or by the sea, where rest, graduated exercise, fresh air and wholesome food could help overcome the debility resulting from illness or surgery’.⁷

Similar arguments regarding location are also evident in Whitney’s description of

Cropwood, which according to her stood, 'on a high hill overlooking miles of country, the view on a fine day compassing the borders of Wales and the Malvern Hills, seventy-five miles clear across beautiful undulating hills and valleys. The whole atmosphere of the place was full of happiness and clean sunshine'.⁸ Her description is somewhat romanticized but it does chime with the Cropwood prospectus which stated that 'it stands on high ground near to the Lickey Hills and the air is pure and health giving'.⁹ The terms used to describe the environmental conditions emphasized the cleanliness and purity of the air and the health giving properties of the sunshine, which was presumably to contrast with the dirty and impure surroundings of the patients' homes, and therefore also their lives, in inner-city Birmingham. This medical-moral discourse is one that is often used in relation to the environment at this time and one that will be returned to later in this chapter.

These geographical descriptions with their emphasis on the height of the location above sea level, magnificent views and wind direction, point to a shared philosophy regarding where such institutions should be placed. As many of these descriptions are found in advertisements aimed at potential subscribers (who contributed to institutional funding) as well as patients and their families, it suggests there was a general shared understanding of the potential therapeutic influence of the environment. In particular, this was seen as beneficial for convalescing patients as well as those with chronic conditions and children deemed to be weak or pre-tubercular.¹⁰ It should also be noted that similar advertisements highlighting the environmental conditions were produced for tuberculosis sanatoria during this period and that they also espoused open-air philosophies.¹¹

However, there were other factors at play which were more philanthropic than environmental in nature. Both Cropwood and Hunters Hill schools owe their origins to Geraldine and Barrow Cadbury, who were both practising Quakers and part of the wider Cadbury chocolate manufacturing dynasty.¹² The Cadburys' had already established a day

school based on the open-air principles at Uffculme near Moseley, designed by Barry Peacock in 1911.¹³ It was also Peacock who adapted the Cadburys' home at Cropwood into a residential open-air school in for girls in 1922. The later Hunters Hill school for boys was built on part of the Cropwood site.

The Cadburys' interest in the open-air method was related to personal experience as well as one that followed contemporary trends. When their own son, Paul aged twelve, became ill with tuberculosis in 1907 they consulted the doctor Sir Thomas Barlow, who recommended 'educating him at home in the country and ensuring that he had plenty of good food and fresh air'.¹⁴ Following this advice, the Cadburys' adapted Paul's bedroom at their country estate of Cropwood in 1907 so that he had one wall completely open to the air. As his health improved enough for him to return to conventional education, his parents appear to have felt that this method of treatment should be made available to those from more impoverished backgrounds. After initially building the Uffculme open-air school in the grounds of their family home at Moseley, they went on to donate the whole of their Cropwood estate for educational use.

Similarly, Burcot Grange was gifted to the Birmingham & Midland Eye Hospital by Mr and Mrs Rushbrooke in 1936. Like Barrow Cadbury, Frederick Rushbrooke was a successful businessman and started what is now the ubiquitous chain of Halford bicycle shops. It is not clear why he donated the Grange, but the cluster of institutions near Blackwell seem to have developed through a combination of patronage and a belief in its suitability as a therapeutic environment.

Open-air therapies

All the institutions based in Blackwell appear to have practised open-air therapies to a greater or lesser extent. This therapeutic approach ensured that patients spent as much time as possible in the fresh air and sunshine, as both were considered to have curative properties. F.

B. Smith argues that the vogue for open-air sanatoria began in Germany around 1860, ‘inspired by a mixture of traditional cure-taking at spas, nature worship, and a new physiology of lung weakness’.¹⁵ After Robert Koch discovered the tuberculosis bacillus in 1882, the concept that disease was caused by germs gradually became the standard theory of disease causation.¹⁶ While men like Koch tried to develop specific serum therapies in the 1890s, inspired by the highly successful small-pox vaccine, other doctors developed therapeutic approaches in response to a new understanding of natural immunity. According to Paul Weindling, these doctors ‘emphasised the importance of strengthening the body’s natural resistance to disease rather than promoting “artificial immunity” through mass immunisation’.¹⁷ Therefore the use of open-air therapies in the specialist institutions and convalescent homes in Blackwell could be seen as a way to strengthen the body’s natural immunity.

This theory was expressed in a paper published in *The Medical Officer* in 1909, which also argued that open-air therapies were gaining popularity in Britain:

In fact the “fresh air cure” has become almost a household word, and many people seem to look upon fresh air as a kind of specific or panacea for phthisis¹⁸ in the same sense as we look on opium as a specific for pain. To my mind, this is quite an erroneous view; what the fresh air does is to increase metabolism and thus increase the resisting power of the individual to the tubercle bacillus.¹⁹

As Roger Cooter has argued, while bacteriology theories still permitted air to be thought of as a reservoir of harmful agents, as in earlier theories of disease caused by miasma (or bad air) which had been popular amongst Victorians such as Florence Nightingale, they also allowed more emphasis to be placed on air as curative or constitutionally restorative in and of itself.²⁰ This emphasis on the therapeutic nature of air led to gardens being considered a fundamental element of the therapeutic regime.

Blackwell convalescent and medical institutions

As convalescent homes and other specialist institutions such as sanatoria became popular at the end of the nineteenth century, there was also a change in the perceived importance of gardens for patients within general hospitals. As the eminent physician John Syer Bristowe argued in 1871 in relation to the building of the new St Thomas's Hospital in London:

as regards airing courts for patients; there is no doubt that these are desirable, but they are far more important for a sanatorium, or a convalescent institution, than for a general Hospital; because, [...] when that stage has been reached, at which out-of-door exercise or air is desirable, the patients have to be discharged to make room for more pressing cases of disease.²¹

This emphasizes how the therapeutic value of gardens shifted so that they became seen as more important for longer-term residential patients rather than short stay hospital cases. This also reflects the growing medicalization of general hospitals and a change in the locus of patient recovery for chronic conditions and after immediate hospital based treatment.

According to Harriet Richardson,

A fundamental factor governing the design of convalescent homes was the mobility of the patients, who were neither expected, nor encouraged, to remain in their beds during the day. As a result, day-rooms, dining-rooms and attractive grounds were common features in the earlier homes.²²

These elements were easily adapted to serve the open-air therapeutic approach as it was more widely introduced at the start the twentieth century. The Blackwell Convalescent Home for Birmingham and the Midland Counties Report, of 1932, records:

As the Conservatory was in need of repair a suggestion was put forward that it should be converted into an Open-Air Ward, which would be of advantage to patients,

particularly those received from the Queen's Hospital. This conversion has been carried out and is hoped will be appreciated by and be beneficial to the patients.²³

There is no clear evidence of the extent to which open-air therapies were carried out at the Home but this implies that they thought it was important for at least some convalescent patients.

It is difficult to find patient accounts of what the regime was like in the Home. However, on the back of a postcard illustrated with a photograph of the back of the Home with its outside shelter and glazed day rooms sent to Mr and Miss Morris on the 24 June 1959, Auntie Rose wrote

Have spent three happy weeks here among the 100 patients. This place stands in lovely grounds 15 miles from Worcester overlooking the Malverns. Have spent most of the time sitting in sun lounge and walking or sitting in the grounds. Am feeling much better but cannot walk far yet.²⁴

This suggests that, in 1959, spending time outside either sitting or walking in the grounds still formed an important element of the daily life of the convalescent, despite the decline in the use of open-air therapies after the second world war.

Similarly at the Uplands, the children 'had a field to romp and play in, swings and other amusements, a large play-hut for wet or cold days and beautiful grounds'.²⁵ This indicates that similar open-air ideas were being practised here and the particular importance of the huts, fields and grounds for the recovery of children will be discussed in relation to the open-air schools below.

There is little evidence of the design of the grounds at the Blackwell Home but it is possible to delineate some of the features from postcards that show the rear of the house. The earlier postcard, which is undated, shows a conservatory adjoining the right side of the house, a steeply sloping garden planted with trees and shrubs, and a steep flight of steps that

descends to a gate in the foreground of the photograph.²⁶ On the later photograph the conservatory was still there but there was also a new area with large glass windows in the centre of the building, possibly a day room or dining room (Figure 8.5). The postcard also shows a flight of steps descending from this new room to a terrace. The steps have a hedge to their left that is cut into an ornamental shape, which suggests that the gardens were designed to be attractive as well as functional.

The 1937 OS Map depicts an avenue of trees running in a diagonal across a field at the base of the steep slope by the Home. There is also a footpath marked through the centre of this field that led directly from the sanatorium. Part of the convalescent regime included exercise and it is likely that the patients would have been encouraged to walk further than the immediate grounds around the Home. The same map also shows a number of pine trees to the north west of the Home, which may reflect the German and Alpine precedents of open-air therapy.

Within this cluster there was also an institution with an apparently more directly medical rather than convalescent remit. Burcot Grange, a Victorian half-timbered country house with ornamental gardens was used as an annexe to the Birmingham & Midland Eye Hospital (located in Church Street, Birmingham) and provided accommodation specifically for women and children. However, like the other institutions in Blackwell, its rural location, or at least the removal of its patients from their poor urban living conditions was considered as important as the medical care it offered. The hospital's 1938 Annual Report suggested that children might need to stay longer at the Grange for reasons other than the eye treatments available: 'Not only is the condition given all necessary treatment, but every effort is made to effect improvement in the general health and physique of the children'.²⁷ This is used in the Report as an argument to extend the length of stay of children in the hospital and is clearly related to more general concerns about their overall state of health. The Annual Reports also

include three photographs of the gardens at Burcot Grange. Two of the photographs show walks through what appear to be rockeries and past drifts of daffodils. The final photograph shows the lily ponds and terraces, and what appears to be a conservatory attached to the house (Figure 8.6). The gardens may well relate to the earlier history of the house as the residence of Mr Rushbrooke, who donated the house and gardens, but the conservatory is perhaps an indication that similar therapeutic practices relating to sunshine and air were also being conducted.

Cropwood open-air school

On 17 June 1922, Cropwood open-air school was opened and the buildings plus 75 acres of land were formally handed over to the Birmingham Education Department. Cropwood was developed as a residential school for children from deprived areas in inner city Birmingham who had been diagnosed with a physical ailment that would benefit from open-air treatment. According to Whitney, the decision to admit them to the school was ‘made by the doctors who have treated them for measles or scarlet fever, or some other debilitating childhood disease, usually combined with malnutrition.’²⁸ Unlike the previous examples, there is more explicit evidence that the gardens at Cropwood were an integral part of the school regime. A detailed plan of the house and grounds at Cropwood survives which clearly depicts a great variety of garden features (Plate 8.1). These include the sleep-time garden described by Whitney above, a children’s garden, outdoor classrooms, a treehouse, a rose pergola, an outdoor swimming pool, the children’s playing lawn, a tennis court, arbours and a small farm with vegetable garden (Figure 8.7). The range of features is clearly related to the outdoor philosophy of the school but the style of the plan itself is also worth noting.

The artist who created the plan, Bernard Sleight, was a leading member of the Birmingham Guild of Handicraft and the Bromsgrove Guild of Applied Art, so the arts and crafts style is

perhaps to be expected.²⁹ However, the choice of style also perhaps reflects the shared ideals of the wider Cadbury family. For example, the Bournville model estate created by Barrow's Uncle, George Cadbury is described by the latest Pevsner Architectural Guide as 'perhaps the fullest expression of arts and crafts ideals'.³⁰ Gardens were central to the design of the village and 'Cadbury himself placed an emphasis on the advantages to a family's health and economics of a well-kept garden'.³¹ Although much of the architectural credit for the estate may be due to the architect, William Alexander Harvey, interesting comparisons can also be drawn with the idealized factory in a garden as typified in promotional literature, including the 'This is Bournville' advertisement of 1910.³² As John Bryson and Philippa Lowe have argued, these advertisements 'emphasized the wholesome quality of the environment in which chocolate was manufactured' and also used gardens to 'dignify tranquility and nature, whereas a factory is associated with connotations of noise and pollution'.³³

In both the plan of the school and the advertisement the buildings were given less prominence than the landscape surrounding them. The link between ideas of purity and the garden setting of the factory perhaps also has parallels with the fairytale image of the school estate with its tree house and sleep-time garden. This parallel between the Bournville factory and the Cropwood estate also fits with Linda Bryder's argument that, 'the open-air school movement in fact harked back to a sentimental pre-industrial Golden Age'.³⁴ The gardens at Bournville similarly give the impression of an earlier more rustic time, belying its reality as a modern factory.³⁵

The close parallels with Bournville are unsurprising given the close Cadbury family network. Common interests regarding the influence of the environment on health were certainly shared by Geraldine Cadbury and her niece Elizabeth Taylor Cadbury. For example, Helen Smith has argued that Elizabeth felt that "physical deterioration" as well as infant mortality and drunkenness were the result of debilitating urban conditions' and that

Bournville was contributing to the amelioration ‘of the public health risks caused by the urban environment’.³⁶ This has obvious parallels with the work of Geraldine in relation to open-air schools with their intake of impoverished and sickly inner city children; the significant role played by such women deserves further attention.

Geraldine’s personal involvement certainly should not be underestimated. Beginning with Uffculme she seems to have been involved in much of the design and implementation of the schools. In line with open-air design principles, the classrooms were built with doors and windows that would open out so that there were no walls on three sides when they were in full use. According to Whitney, ‘her ingenuity not only put hot-water radiators on the wall side of the classroom, but ran them under the sides that might be opened, so that the entering air might be tempered by the upward flow of air. I believe this system is quite original with her’.³⁷ Once Cropwood became her focus she ‘involved herself in every detail of the design’.³⁸ Whitney recorded how

Geraldine Cadbury herself chose and bought every article of furniture for Cropwood and all the clothes for the fifty-two little girls who were the first pupils – green serge dresses and figured *crêpe* frocks from Liberty’s, camp-beds for the outdoor afternoon sleep, even their lesson-books and story-books.³⁹

The gardens as outside spaces were obviously integral to the open-air approach conducted at the schools. Whitney is again a useful voice as she records her visits to the schools in the 1940s. It is worth including at length her detailed description of the important role played by the gardens at Uffculme open-air school, also established by Geraldine and Barrow Cadbury:

their lessons in these open classrooms give a sort of camping-out holiday feeling to the place. The play in the open air is so free. The trees and hedges help keep it rural and simple. There is nothing of the playground about it. I saw one group in the lower meadow having organized games, and another group just rolling about on the grass

like little ponies, running about, playing tag, two or three boys kicking a football. The ground being on two levels, with an apple orchard on the higher ground right by the school, and a meadow on the lower ground, with a grassy slope between, gives a special charm, and greatly adds to the feeling of space. Gardening is also one of the children's occupations, and they have recently won prizes for their products in a local show.⁴⁰

The romantic idyll proclaimed in such descriptions and as depicted in Sleigh's plan is also reflected in some of the later oral histories collected from those who had attended the open-air schools as children. For example, Mrs Elsie Kite, who had been Head Girl at Cropwood 1936-9, recounted how

The school grounds were lovely with large cedar trees along the drive. There was an orchard full of apple trees ... There was a tennis court and a pergola with roses covering the top, and beds of red poppies each side leading to the swimming pool. There were fir trees all round the classrooms. The smell from the trees was supposed to be good for you.⁴¹

The outdoor approach included time set aside for sleeping during the day as an integral therapeutic element to help children recover from the ailments that had led to their admission, which mirrored the time spent by patients with tuberculosis sleeping on balconies.⁴² The importance of outdoor sleep can be seen in the plan of Cropwood with its sleep-time garden. At Uffculme, Whitney recorded how, 'besides the food there is a daily rest in the healthy-building scheme. Each child sets up its own light cot, either in a huge airy shed, three sides of which can be opened completely to the air, or out on the grass under the apple trees'.⁴³

Activities undertaken by the children were described by Whitney as follows: 'handicrafts are a great feature of the educational scheme, and open-air games and swimming are, of course a main feature of the children's natural and free-looking

life'.⁴⁴ These activities reflected wider ideas regarding the way the school should operate. In 1915, the Inspector of Educational School Gardening for Somerset, G.W.S Brewer wrote that:

The chief points about school work associated with the garden are the facts that children are brought into touch with actualities; they work and breathe the fresh air amidst surroundings they themselves largely help to shape ... As to the garden itself for the open-air school, I would have it to embrace not only land for vegetable culture, but also borders for flowers and shrubs, a rock garden, fruit, Nature study, and geographical plots, and if by any means possible a nice sweep of lawn.⁴⁵ (Figure 8.8)

Similarly, Arthur Beasley recalled that at his stay at Hunter's Hill in 1933, 'lessons were not so academic as a normal school but we were involved in a lot of activities including handicraft and nature study, gardening, country walks etc'.⁴⁶ These accounts are in line with Bryder's argument that the 'schools were seen as character-building institutions, training in "natural" living'.⁴⁷

These are all very seductive images, however we should remember that this was an open-air school in Britain. As Whitney recorded on hearing about the cots: "'How nice", I say, "out in the sunshine!" "Yes", said the headmistress dubiously, "or under the grey sky". They had been out that very day under the soft, chill, grey sky, with a brisk breeze and flying autumn leaves'.⁴⁸ At Uffculme, even with its innovative heating system Whitney noted the cold:

it was a breezy day, and the room I first went into was open fully on two sides and partially open on the third. I was dressed in overcoat and fur, and inclined to shiver.

The children were mostly very poorly clad, with bare arms and legs and cotton frocks (in the case of girls).⁴⁹

As the children were meant to be exposed to the open air all year round, it also led to events such as this recorded by Maurice Hicks, who had been at Hunter's Hill, 1935-8: 'I remember many mornings, in the winter, waking up to find the bottom of the bed covered in snow'.⁵⁰

Within the rich oral histories and log-book accounts recorded by Frances Wilmot and Pauline Saul, there are recurring accounts of children thinking about or actually running away. For some children it seems to have been a welcome break from the hardship of inner-city life but others felt incredibly homesick and struggled with the different food and cold showers. Others were removed and taken home by their families on visiting days. So, we should remember that the experience was not always a happy one and conditions could be very difficult. However, the oral accounts suggest that for other children the rural experience was positive and formative.

There are some indications that the children also had agency of their own and could develop this natural-living approach outside of the proscribed boundaries: Beasley described how

myself and three friends had a den in the top field under the hawthorn hedge. Looking back now, this den was quite amazing. We had dug down into the earth about four or five feet, covered this with tree branches, and put grass turf on top of this. We had a hidden trap door to enter and for light we had wax tapers stuck in the earth wall!⁵¹

There was also a strong moral element attached to education in the open-air, which reflected wider concerns around the perceived connections between physical deterioration, moral depravity and urban poverty. For example at Cropwood in the 1920s it was noted that children lost weight when they went home in the summer holidays. This was 'attributed to the loss of regular meals, rest, exercise and an irregular life led in the holidays'.⁵² There are clear parallels with Geraldine Cadbury's work with young offenders. In her 1938 book, *Young Offenders Yesterday and Tomorrow*, she praised the 'aims of the farm colony set up at

Stretton-on-Dunsmore in Warwickshire in 1818, which hired out boys from county gaols to work on local farms, with the aim of reforming rather than punishing them'.⁵³ Geraldine was not alone in holding this idea. As well as advocating farming as part of the curriculum in open-air schools, in 1915 James Campbell also noted that in his work at reformatory schools for boys he had found that 'the boy benefits morally by work in his garden, and his physical improvement is decidedly apparent'.⁵⁴ He went on to emphasise the strength of the moral element of gardening: 'A careful study of boys and their gardens at Stoke Farm Reformatory School goes to show that as a reforming influence the garden – the boy's own garden – is a powerful aid.'⁵⁵

The Headmistress at Uffculme definitely relayed a moral narrative to Whitney when she visited

It's often just the crowded conditions in the slum areas where they live that make children difficult. One of the greatest releases they find here is space. They've plenty of room! A child may get in wrong with the children of the neighbourhood, and find itself involved in constant fights, and get a bad name. But when the child comes here, if it doesn't like its companions, it can get away from them. It can try going by itself, for a while, [...], or it can choose a congenial set of companions to play with.⁵⁶

The rural environment was thereby also seen as a space away from immoral influences.

The restorative powers of the garden on both the mind and the body are also literary themes in the period. In *The Glory of the Garden* written by Rudyard Kipling and first published in his *A School History of England* in 1911 there were moral overtones to the act of gardening, which reflected those of the Reformatory school.

There's not a pair of legs so thin, there's not a head so thick,
There's not a hand so weak and white, nor yet a heart so sick,

But it can find some needful job that's crying to be done,

For the Glory of the Garden glorifieth every one.⁵⁷

According to Anne Helmreich, this poem uses the 'metaphor of England as a garden to reinvigorate the value and benefits of hard work'.⁵⁸ Helmreich has also argued that the

fears of a disintegrating domestic order and a declining international profile drove the desire to equate gardens with Englishness. In visualizing England as a garden and promoting the garden as a symbol of the nation, artists, architects, designers, and writers were responding to a growing perception that nature and the English rural landscape, as well as the nation itself, were no longer immutable.⁵⁹

The most famous example of the therapeutic powers of a garden on the health of a child in a literary work is arguably Frances Hodgson Burnett's *The Secret Garden* published in 1911 (Plate 8.2). In line with open-air ideals, it was being indoors that caused Colin's character to become weak and sickly:

So long as Colin shut himself up in his room and thought only of his fears and weaknesses and his detestation of people who looked at him and reflected hourly on humps and early death, he was a hysterical, half-crazy little hypochondriac who knew nothing of the sunshine and the spring, and also did not know that he could get well and stand upon his feet if he tried to do it.⁶⁰

One of the first factors in the hypochondriac Colin's recovery was the opening of the windows so that he could breathe in the fresh air. The heroine, Mary, also described how Dickon, her friend who spent all his time outdoors and was close to nature, felt about fresh air: 'He says he feels it in his veins and it makes him strong and he feels as if he could live for ever and ever'.⁶¹ The strong message in this didactic children's book is that fresh air and being outdoors in a garden is good both mentally and physically. This reflected contemporary medical advice. In 1910, David Chowry-Muthu, an Indian physician who established the Hill

Grove Sanatorium in the Mendips and the Tambaram Sanatorium in India, argued that open-air therapy was a ‘natural treatment’ and suggested that, ‘the secret of its widespread interest in Europe is due to the discovery – if discovery it may be called – that fresh air, hitherto regarded as an enemy to be shut out and barred, is really a friend, and one of Nature’s best gifts to man’.⁶² Like many, he related the concept of open-air therapies to a time before industrialisation and urbanisation, ‘that man, by building towns and manufacturing dirt and disease, is undoing Nature’s work, and that to put himself right again he must go back to Nature, and lead an open-life in the green fields and meadows, and breathe the sweet fresh air’.⁶³

This brings us back again to medical-moral discourses. It suggests that if the dirty air of the town was the problem, the clean air of the countryside was the obvious solution. These concepts were certainly still popular in the 1940s and were reflected by Whitney in her description of the perceived limitations of Uffculme open-air school which only took day pupils. According to her as soon as Uffculme was established, Geraldine Cadbury began to worry about children ‘who needed the kind of care, for a short period, which would preclude their going back to dirty and germ-laden homes at night’.⁶⁴ Similarly, when Whitney described the children who attended the later, residential Cropwood, she stated that, ‘most of the children who come to this school are from the poorest districts in Birmingham. They have lived all their lives in stuffy, overcrowded, often dirty homes. The change is tremendous’.⁶⁵

Garden cities and the open-air movement

These medical ideas concerning the value of fresh air and sunshine influenced other broader movements in Britain, including the development of the Garden City ideal and modernist architecture.⁶⁶ Although in the case of the Blackwell institutions and Bournville, the architectural influence seems to have been predominately influenced by the arts and crafts rather than the Modernist movement (Figure 8.9). As Margaret Campbell has testified,

‘Britain retained an architectural loyalty to the Arts and Crafts movement [...] despite many innovative features’.⁶⁷ Although the innovative features Campbell is discussing here relate to the Edward VII sanatorium built according to open-air principles to treat tuberculosis, similar modernist features, including purpose-built pavilions and folding doors, could be found at the institutions based in Blackwell.

The ideals of the arts and crafts movement and their relationship to open-air principles are worth exploring a little more. John Ruskin, as a founder of the movement, was particularly admired by the Cadbury family – not only did Geraldine and Barrow have a portrait of him in their photograph album but the Bournville School of Arts and Crafts was originally called Ruskin Hall. In 1865 Ruskin had postulated an idealized city full of gardens and with easy access to the countryside. He discussed how one could improve the houses that existed already and then

the building of more - strongly, beautifully, and in groups of limited extent, kept in proportion to their streams, and walled round, so that there may be no festering and wretched suburb anywhere, but clean and busy streets within, and the open country without, with a belt of beautiful garden and orchard round the walls, so that from any part of the city perfectly fresh air and grass, and sight of far horizon, might be reachable in a few minutes' walk.⁶⁸

Sharing similar views with Ruskin, William Morris, another leading instigator of the arts and crafts group, wrote *News from nowhere* (1890), a utopian vision set in the future where everyone lived in the countryside. Within this text he made constant references to similarities between this future world and the mediaeval period.⁶⁹ In this world where people have returned to a pre-industrial way of life there were also echoes of the new open-air philosophy, with outdoor work being recommended as a method ‘to clear the cobwebs’ from the brain.⁷⁰ One of the characters inhabiting this land explained to the protagonist that

these children do not all come from the near houses, the woodland houses, but from the countryside generally. They often make up parties, and come to play in the woods for weeks together in summer-time, living in tents, as you see. [...] the less they stew inside houses the better for them.⁷¹

Similarly, the protagonist often comments on how healthy and young the people look in comparison to those of the industrialised society he has left. For example, the children in the forest were described as being ‘especially fine specimens of their race’⁷² and ‘as to the women themselves, it was pleasant indeed to see them, they were so kind and happy-looking in expression of face, so shapely and well-knit of body, and thoroughly healthy looking and strong’.⁷³ Throughout the novel Morris argues that a life of physical labour in a rural setting with as much open-air as possible was the reason for the health, youth and beauty of the fictional population. This can be seen as being related to both the fear of ill-health caused by urbanisation and industrialisation and the myth that rural living created a stronger, healthier population.

These ideas were espoused by many of those in the medical profession. Benjamin Ward Richardson, physician, sanitary reformer and prolific writer, described his utopian city, *Hygeia*, just ten years after Ruskin had laid out his. Within this vision, which he argued was based on the latest scientific principles, gardens and open spaces were given an important, if somewhat less romantic, role:

The acreage of our model city allows room for three wide main streets or boulevards, [...] They are planted on each side of the pathways with trees, and in many places with shrubs and evergreens. All the interspaces between the backs of houses are gardens. [...] other public buildings, as well as some private buildings such as warehouses and stables, stand alone [...] They are surrounded with garden space, and add not only to the beauty but to the healthiness of the city.⁷⁴

Ebenezer Howard, the visionary behind the Garden City movement, was heavily influenced by Ward Richardson, as well as Morris and Ruskin amongst others, and argued in the 1890s that although the country ‘is the source of all health, all wealth and all knowledge’ it needed to be combined with society as symbolised by the town.⁷⁵ The solution to the problems caused by urbanisation was to bring the countryside into the towns in the form of gardens – the *rus in urbe* ideal. However, in his 1902 Garden City plan he still placed ‘children’s cottage homes’, a ‘farm for epileptics’, ‘asylums for blind and deaf’ and ‘convalescent homes’ in rural areas between fruit farms, allotments and cow pastures which highlights the importance placed on the pastoral nature of the environment for such institutions.

Some of the medical profession appear to have viewed the garden city as a potential weapon in their ongoing war against the degeneration of the population. In 1919 Dr Leonard Hill, Director of Applied Physiology of the National Institute for Medical Research argued that garden cities were the solution, rather than building more houses on the edges of existing towns, as they could help create a more vigorous and happy nation. He wrote that ‘it is open air and exercise, good feeding and well-regulated rest, which have converted weedy citizens into robust soldiers, which restore the weakly in open-air schools, and the consumptive in sanatoria’.⁷⁶ The idea that there had once been an English golden age of health before the development of the towns, when people were employed on the land, also embraced broader fears that the British race was degenerating in terms of physical and moral health. During recruitment for the Boer War, doctors had reported that there was a low level of physical fitness in the general population. These concerns in turn led to the investigation of the health of the population by the 1904 Interdepartmental Committee on Physical Deterioration..⁷⁷ The concerns regarding efficiency, morality and the future health of the nation certainly affected

the development of school architecture throughout the country, as Tom Hulme has already shown.⁷⁸ would revitalise their bodies and stem the degeneration of the labouring classes.

The cluster at Blackwell provides us with a snapshot of much wider medical, moral and national concerns. The institutions look back towards a golden age of rural living but at the same time argue that they are progressive in their approach to convalescence and health. The gardens are essential spaces for the successful implementation of open-air therapies and are therefore given prominence in eye-witness descriptions, patient accounts and other promotional literature. The gardens also reflect social and cultural concerns regarding urbanisation and industrialisation and relate to fears that the population was degenerating. The post-second-world-war decline in open-air institutions is symptomatic of changes in medical understanding, particularly with the discovery of antibiotics, as well as other broader changes in housing conditions and welfare. By using cultural, medical and garden history methodologies, these landscapes can be interrogated so that they become more than just spaces for air, sunshine and exercise. This broader approach could provide a fruitful way to reconsider the role of other institutional, industrial and urban landscapes. Concerns around our health and wellbeing have always been woven into the fabric of everyday life and are, therefore, also fundamental influences on our use and design of gardens.

Notes

¹ J. Whitney, *Geraldine S Cadbury 1865-1941: A Biography* (London, 1948), p93.

² References to key works by these authors can be found in the Bibliography.

³ F. Wilmot and P. Saul, *A Breath of Fresh Air: Birmingham's Open-Air Schools, 1911-1970* (Chichester, 1998)

⁴ 'The Blackwell Sanatorium', *Worcester Journal*, Saturday 15 July 1876, p.7

⁵ Its name changed again in 1952, when it became the Blackwell Recovery Hospital.

⁶ Worcester Record Office (WRO): b499.8/B.A.10134/20 *Prospectus for Blackwell Convalescent Home for Birmingham and the Midland Counties*, stuck in a Scrapbook from Blackwell Convalescent Home for Birmingham and the Midland Counties, n.d.

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- ⁷ H. Richardson, *English hospitals 1660-1948; A survey of their architecture and design* (Swindon, 1998), p.183. See Richardson for more details on the relationship between spa towns and convalescent homes.
- ⁸ Whitney, p.91.
- ⁹ Birmingham Archives and Heritage (BAH): MS617/234a City of Birmingham Education Committee, Cropwood Residential Open-Air school, Blackwell Prospectus.
- ¹⁰ For more information on the open-air movement and tuberculosis see L. Bryder, *Below the Magic Mountain: A social history of tuberculosis in twentieth-century Britain* (Oxford, 1988) and 'Wonderlands of Buttercup, Clover and Daisies': Tuberculosis and the open air school movement in Britain, 1907-39 in R. Cooter, (ed) *In the Name of the Child: Health and Welfare 1880-1940* (London,1992), pp. 72-95. The role of gardens as part of the wider movement is also discussed in C. Hickman, *Therapeutic Landscapes: A History of English Hospital Gardens Since 1800* (Manchester, 2013).
- ¹¹ Hickman, *Therapeutic Landscapes*, pp. 152-205.
- ¹² See M. Waterson and S. Wyndham, *A History of the Barrow Cadbury Trust: Constancy & Change in Quaker Philanthropy* (London, 2013), for more detail on Geraldine and Barrow Cadbury and their family history.
- ¹³ The building is now listed Grade II by Heritage England.
- ¹⁴ Waterson and Wyndham, p. 33.
- ¹⁵ F.B. Smith, *The Retreat of Tuberculosis, 1850-1950*, (Kent, 1988) p. 97.
- ¹⁶ P. Weindling, 'From Infectious to Chronic Disease: Changing Patterns of sickness in the Nineteenth and Twentieth Centuries' in *Medicine in Society*, A. Wear (ed.), (Cambridge, 1992)
- ¹⁷ *Ibid* pp. 313-314.
- ¹⁸ This was the term sometimes given to the pulmonary form of tuberculosis.
- ¹⁹ A. Warner, originally a paper given at Leicester, 'Open-air recovery schools' in *The Medical Officer* (25 December 1909) p. 469.
- ²⁰ R. Cooter, 'Open-air therapy and the rise of open-air hospitals', *The Bulletin for the Social History of Medicine*, 35 (1984), p. 44.
- ²¹ J.S. Bristowe, *An introductory address on the future of St Thomas's Hospital, delivered at the hospital in the Surrey Gardens on the occasion of the opening of the session of its medical and surgical college*, 1 October 1862 (London, 1862), p. 13.
- ²² Richardson, *English Hospitals*, p. 183.
- ²³ WRO: b499.8/B.A.10134/20 *Blackwell Convalescent Home for Birmingham and the Midland Counties Report*, 1932, stuck in a Scrapbook, p. 2.
- ²⁴ National Monuments Record Centre (NMRC): National Buildings Record Index Number 100767 Postcard, 24 June 1959. From Auntie Rose to Mr and Miss Morris.
- ²⁵ P. Maskell, *Best of Health: 130 Years of the BHSF 1873-2003* (Birmingham, 2003), p.17
- ²⁶ NMRC: National Buildings Record Index Number 100767 Postcard, n.d.
- ²⁷ Wellcome Library: Birmingham and Midland Eye Hospital, *Report of the year's work of the Birmingham and Midland Eye Hospital* (1938).
- ²⁸ Whitney, p. 91.
- ²⁹ See R. Cooper, 'Bernard Sleight, artist and craftsman, 1872-1954', *The Journal of the Decorative Arts Society 1850 - the Present*, 21, (1997), 88-102. As well as being heavily influenced by William Morris and Edward Burne Jones, he corresponded with Walter Crane, who viewed gardens as utopian and socialist spaces, see M. O'Neill, 'Walter Crane's Floral Fantasy: The Garden in Arts and Crafts Politics,' *Garden History* 36/2 (2008), pp. 289-300.
- ³⁰ A. Foster, *Pevsner Architectural Guides: Birmingham* (New Haven and London, 2005), p. 22.

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- ³¹ N. Pevsner and A. Wedgwood, *The Buildings of England: Warwickshire* (Harmondsworth, 1974), p. 156.
- ³² An electronic version of this can be accessed under Bournville at <<http://www.search.connectinghistories.org.uk>>, accessed 10 June 2015.
- ³³ J.R. Bryson and P.A. Lowe, 'Story-telling and history construction: rereading George Cadbury's Bournville Model Village', *Journal of Historical Geography*, 28/1 (2002), p. 26.
- ³⁴ Bryder, p.72
- ³⁵ For more on the Bournville gardens see the work of H. Chance and in particular 'The angel in the garden suburb: Arcadian allegory in the "Girls' Grounds" at the Cadbury factory, Bournville, England, 1880–1930', *Studies in the History of Gardens & Designed Landscapes* 27:3 (2007), 197–216
- ³⁶ H. V. Smith, *Elizabeth Taylor Cadbury (1858-1951): religion, maternalism and social reform in Birmingham, 1888-1914*, PhD thesis (University of Birmingham, 2012), p.77.
- ³⁷ Whitney, p. 89.
- ³⁸ Waterson and Wyndham, p. 40.
- ³⁹ Whitney, p. 92.
- ⁴⁰ Whitney, p. 90.
- ⁴¹ Wilmot and Saul, p.122.
- ⁴² The design and use of balconies and sun loungers for patients with TB is discussed in M. Campbell, 'What Tuberculosis did for Modernism: The Influence of a Curative Environment on Modernist Design and Architecture' in *Medical History*, 49 (2005), pp. 463–488.
- ⁴³ Whitney, p. 89.
- ⁴⁴ Whitney, p. 92.
- ⁴⁵ G.W.S. Brewer, 'School gardening and open-air schools' in T. Kelynack (ed.), *The year book of open-air schools and children's sanatoria*, vol i, (London, 1915), p. 162.
- ⁴⁶ Wilmot and Saul, p.97
- ⁴⁷ Bryder, p. 90.
- ⁴⁸ Whitney, p. 89.
- ⁴⁹ Whitney, p. 87.
- ⁵⁰ Wilmot and Saul, p. 133.
- ⁵¹ Wilmot and Saul, p. 98.
- ⁵² *Ibid*, p. 67.
- ⁵³ Waterson & Wyndham, p. 33.
- ⁵⁴ J. Campbell, 'School Gardening in Reformatories for Boys' in T. Kelynack (ed), *The Year Book of Open-air Schools and Children's Sanatoria*, vol i (London, 1915), p. 91.
- ⁵⁵ *Ibid.*, p. 96.
- ⁵⁶ Whitney, p. 88.
- ⁵⁷ R. Kipling, *Rudyard Kipling's Verse; Definitive Edition* (London, 1940), pp. 732-733.
- ⁵⁸ A. Helmreich, *The English Garden and National Identity; The Competing Styles of Garden Design, 1870-1914* (Cambridge, 2002) p. 36.
- ⁵⁹ *Ibid*, pp. 7-8.
- ⁶⁰ F. Burnett, *The Secret Garden*, (1911, Harmondsworth, 1982) p. 239.
- ⁶¹ *Ibid*, pp. 168-169.
- ⁶² C. Muthu, *Pulmonary tuberculosis and sanatorium treatment: A record of 10 years' observation and work in open-air sanatoria* (London, 1910), pp. 83-84.
- ⁶³ *Ibid*.
- ⁶⁴ Whitney, p.90.
- ⁶⁵ Whitney, p. 91.
- ⁶⁶ See M. Campbell, 'What Tuberculosis did for Modernism'.
- ⁶⁷ *Ibid*, p. 467.

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- ⁶⁸ J. Ruskin, *Sesame and Lilies* (London, 1904), p. 199.
- ⁶⁹ W. Morris, *News from nowhere* (1890; 9th edn, London, 1907), p. 24.
- ⁷⁰ *Ibid.*, p. 18.
- ⁷¹ *Ibid.*, p. 29.
- ⁷² *Ibid.*
- ⁷³ *Ibid.*, p. 14.
- ⁷⁴ B. Richardson, *Hygeia, a City of Health* (1876; reprinted Gloucester, 2008), pp. 12-13.
- ⁷⁵ E. Howard, *Garden cities of tomorrow*, (1902; London, 1946), p. 48. For Richardson's influence see in particular R. Beevers, *The garden city utopia: A critical biography of Ebenezer Howard*, (Abingdon, 2002), p.30.
- ⁷⁶ As quoted in Bryder 'Wonderlands of Buttercup, Clover and Daisies': Tuberculosis and the open air school movement in Britain, 1907-39 in Cooter, R (ed) *In the Name of the Child: Health and Welfare 1880-1940* (London: Routledge, 1992), 72-95, pp.84-5
- ⁷⁷ E. Fee and D. Porter, 'Public Health, Preventive Medicine and Professionalization: England and America in the Nineteenth Century', in A. Wear (ed.), *Medicine in Society* (Cambridge, 1992), p. 271.
- ⁷⁸ T. Hulme, "'A Nation Depends on Its Children': School Buildings and Citizenship in England and Wales, 1900-1939", *Journal of British Studies*, 54 (April 2015), pp. 406-432.

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